Image# 29991793271

## **STATEMENT OF**

FORM 1	ORGANIZATION (See instructions)	Office use only
NAME OF COMMITTEE (in the community of the community	(Check if name Example: If typying, type over the lines	12FE4M5
Allstate Insura	nce Company PAC	
ADDRESS (number and s	2775 Sanders Road Suite A5	
(Check if address		
is changed)	Northbrook	IL
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	MOLSON3@allstate.com	
io onangou,		
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if address		
is changed)		
2. DATE 0 3	7 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
3. FEC IDENTIFICA	TION NUMBER C C00040253	
4. IS THIS STATEM	ENT NEW (N) OR X AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my knowledge and belief it is true, correct a	nd complete
Time or Drint Name of	Treasurer Steven C Verney	
Type or Print Name of	Treasurer	
Signature of Treasurer	Electronically Filed by Steven C Verney	Date 03 / 26 / YYYYY
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the person signing this Sta	•
Office Use Only	For further information Federal Election Commis Toll Free 800-424-9530	

	FE	C Form 1 (Revised 02/2009)	Page 2
5.		F COMMITTEE (Check One)  te Committee:	
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Comp information below.)	lete the candidate
	Name of Candida		
	Candida Party Af		Stateent District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candida		
	Party C	ommittee:	
	(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Politica	Action Committee (PAC):	
	(e)	X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its confidence of the confi	nected organization is a:
		X Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
	(f)	X In addition, this committee is a Lobbyist/Registrant PAC.	
	(1)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	gated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
_		in addition, this committee is a Leadership FAC. (Identity Sponsor on line 6.)	
	Joint Fu	ndraising Representative:	
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
		Committees Participating in Joint Fundraiser	
		1. FEC ID number C	
		2. FEC ID number	
		3. FEC ID number	
		4. FEC ID number C	

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Write or Type Committee Name	е		
Allstate Insurance Co	ompany PAC		
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Re	epresentative, or Leade	rship PAC Sponsor
Allstate Insurance Cor	mpany		
			<u> </u>
Mailing Address	2775 Sanders Road Suite A5		
	Northbrook		60062
	CITY▲	STATE A	ZIP CODE A
Relationship:			
X Connected Organization	on Affiliated Committee Joint Fundraisin	ng Representative	Leadership PAC Sponsor
	Identify by name, address, (phone number optional	al), and position of th	e person in
possession of Committ		ai), and position of th	e person in
possession of Committ  Full Name  Stev	ree books and records.	al), and position of th	60062
possession of Committ  Full Name  Stev	2775 Sanders Road Suite A5  Northbrook		
possession of Committed  Full Name  Mailing Address  Title or Position   Treasure  8. Treasurer: List the name	2775 Sanders Road Suite A5  Northbrook	IL	60062
possession of Committed  Full Name  Mailing Address  Title or Position  Treasure  8. Treasurer: List the name and address of a full Name	2775 Sanders Road Suite A5  Northbrook  CITY A  Telepho  ne and address (phone number optional) of the tree	IL	60062
possession of Committed  Full Name  Mailing Address  Title or Position  Treasure  8. Treasurer: List the name and address of a full Name	2775 Sanders Road Suite A5  Northbrook  CITY A  rer Telepho  ne and address (phone number optional) of the treany designated agent (e.g., assistant treasurer).	IL	60062
possession of Committe  Full Name  Mailing Address  Title or Position ▼  Treasur  8. Treasurer: List the name and address of a full Name of Treasurer  Stev	2775 Sanders Road Suite A5  Northbrook  CITY A  Telepho  ne and address (phone number optional) of the tre any designated agent (e.g., assistant treasurer).	IL	60062
possession of Committe  Full Name  Mailing Address  Title or Position ▼  Treasur  8. Treasurer: List the name name and address of a full Name of Treasurer  Steven	2775 Sanders Road Suite A5  Northbrook  CITY A  Telepho  ne and address (phone number optional) of the treany designated agent (e.g., assistant treasurer).  ven C Verney  2775 Sanders Road Suite A5	IL STATEA one number 847 easurer of the commit	60062

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Full Name of Designated Agent	Mario Rizzo		
Mailing Address	3075 Sanders Road Suite G2H		
	Northbrook	<u>IL</u>	60062 –
Title or Position ▼	CITY A	STATE A	ZIP CODE A
Assist	ant Treasurer Tele	phone number 847	402 7621
Banks or Other Deposi safety deposit boxes or n Name of Bank, Deposito	maintains funds. pry, etc.	committee deposits funds, h	olds accounts, rents
safety deposit boxes or n Name of Bank, Deposito	maintains funds.		
safety deposit boxes or n Name of Bank, Deposito	maintains funds.  ory, etc.  ifth Third Bank		
safety deposit boxes or n Name of Bank, Deposito	maintains funds.  ory, etc.  ifth Third Bank  150 S. York Street		
safety deposit boxes or n Name of Bank, Deposito	maintains funds.  ory, etc.  ifth Third Bank  150 S. York Street  Elmhurst  CITY  CITY		60126
safety deposit boxes or n Name of Bank, Deposito  Fi  Mailing Address	maintains funds.  ory, etc.  ifth Third Bank  150 S. York Street  Elmhurst  CITY  CITY		60126
safety deposit boxes or n Name of Bank, Deposito  Fi  Mailing Address	maintains funds.  ory, etc.  ifth Third Bank  150 S. York Street  Elmhurst  CITY  CITY	STATE 4	60126   _   _   _   _   _   _   _   _   _
safety deposit boxes or in Name of Bank, Deposito  Fi  Mailing Address  Name of Bank, Deposito	maintains funds.  ory, etc.  ifth Third Bank  150 S. York Street  Elmhurst  CITY   ory, etc.	STATE A	60126   _   _   _   _   _   _   _   _   _
safety deposit boxes or in Name of Bank, Deposito  Fi  Mailing Address  Name of Bank, Deposito	maintains funds.  ory, etc.  ifth Third Bank  150 S. York Street  Elmhurst  CITY   ory, etc.	STATE 4	60126   _